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ABSTRACT

The people of the City of Boston have made a commitment that, during the Winter of 1988-89, no homeless person will be denied a warm bed, a hot meal, quality health care, and transportation to shelters. This document comprises a progress report on Boston's efforts to address the needs of the homeless. The following summary points are discussed: (1) the number of shelter beds has increased 183 percent since 1983; (2) nearly half of the homeless in Boston come from outside the city; (3) two-thirds of the shelter beds in Massachusetts are located in Boston, although the city represents only 10 percent of the State's population; (4) since 1984, over $44 million of public, private, and foundation funds have been allocated for projects and programs, and city resources totalling $21.7 million have levered almost $23 million in additional funding; (5) the HealthLink program at Boston City Hospital has provided comprehensive medical services to over 8,000 people since 1985; (6) the Mayor, as Chairman of the U. S. Conference of Mayors Task Force on Hunger and Homelessness, has worked for the enactment of the federal Stewart B. McKinney Homeless Assistance Act, which has provided $4.2 million used by 87 non-profit agencies for a variety of programs; (7) Boston has had over 13,000 housing starts since 1984 and the number of vacant public housing units awaiting rehabilitation has declined from 3,750 to 900, with full occupancy scheduled for 1991; and (8) a key element of the City's approach has been to go beyond basic shelter needs and to help homeless persons become more independent and self-sufficient by developing such programs as transitional and single-room occupancy (SRO) housing, job training, and health care. Statistical data are included on four graphs and two tables. (FMW)

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COMMITMENT AND COMPASSION

Boston's Comprehensive Policy for the Homeless

Winter 1988-89

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The people of the City of Boston have made a commitment that, this winter, no one will be denied a warm bed, a hot meal, quality health care, and transportation to shelters.

EMERGENCY SHELTER COMMISSION

Raymond L. Flynn, *Mayor*
Rev. Bernard McLaughlin, *Chair*
Ann Maguire, *Executive Director*

UD 026 851

COMMITMENT AND COMPASSION

Boston's Comprehensive Policy for the Homeless

Winter 1988-89

CITY OF BOSTON
RAYMOND L. FLYNN
Mayor

EMERGENCY SHELTER COMMISSION

Rev. Bernard McLaughlin, *Chairman*
Richard Ring, *Commissioner*
Michael McGuire, *Commissioner*
Barbara Blakeney, *Commissioner*
David Trietsch, *Commissioner*
Ann Maguire, *Executive Director*

CITY OF BOSTON • MASSACHUSETTS

OFFICE OF THE MAYOR
RAYMOND L. FLYNN

November, 1988.

Dear Friends:

I am pleased to present to you "*Commitment and Compassion — Boston's Comprehensive Policy on the Homeless*" — a progress report which describes Boston's efforts in addressing the needs of our homeless community.

The people of the City of Boston have made a commitment that this Winter no one will be denied a warm bed, a hot meal, quality health care, and transportation to shelters.

The number of shelter beds in Boston has increased 183% from 972 in 1983 to 2,754 this year. The people of Boston take great pride in this expression of their concern for all homeless people, which is probably unmatched by any other city in the United States.

In addition to providing a warm bed to every homeless person who wants one, our Healthlink program is one of the best of its kind in the country. We have been able to provide quality health care to Boston's homeless. Healthlink services have made great progress in fighting tuberculosis, a serious problem among the homeless population.

Transportation services will be expanded so that our homeless service van program will be able to provide outreach and transport to shelters throughout the night. Hot meals will be provided at the shelters. We have also begun a job training program at Long Island Hospital, the first of its kind, to help homeless people acquire the skill and jobs that will permit them to resume their independence.

We have been able to make progress in meeting the needs of the homeless only with the help of thousands of selfless volunteers who deserve our special thanks. These individuals donate their time and energy to fighting homelessness in our City. Without their unselfish commitment, Boston would be like many other cities, where homeless people are turned away from overcrowded shelters and forced to sleep on grates and park benches, in playgrounds and doorways on biting cold Winter nights.

While the City and State government, along with our service providers and volunteers, are working hard to address the needs of our City's homeless, it is important to remind ourselves that this is only a first step in the solution of the problem of homeless individuals and families. The real solution is getting the federal government back into the business of helping cities build affordable housing for needy and working families.

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At the local level, City and State governments have been able to collaboratively bring on line record numbers of housing units in Boston. But without the federal government as a partner in this effort, the housing crisis in America continues to hemorrhage. Under previous Democratic and Republican administrations alike, the federal government was an active partner with cities, investing approximately $33 to $34 billion each year for housing, and producing between 200,000 and 300,000 units of housing each year.

This year, without a strong federal housing policy, the federal government's budget for housing has dwindled to $8 billion, and this striking lack of commitment will result in only 10,000 to 15,000 units of housing being produced this year.

Homelessness is not a city problem alone. It is not just a Democratic or Republican problem. It is not a liberal or conservative problem. It is an American problem, that requires all of us working together to solve, as we have shown here in the City of Boston.

Sincerely,

Raymond L. Flynn

Raymond L. Flynn,
Mayor of Boston.

P.S. It must be underscored, that while the city and neighborhood non-profit organizations have been able to provide shelter to homeless people, this is only a temporary solution, the real answer to homelessness is permanent affordable housing.

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II. EXECUTIVE SUMMARY

- This winter, no homeless person will be denied a warm bed, a hot meal, decent health care, and transportation to a shelter.

- The number of shelter beds in Boston has increased 183 percent from 972 to 2,754 between 1983 and this winter.

- Nearly half of the homeless in Boston come from outside of the city—from other parts of Massachusetts or out of state.

- Two thirds of the shelter beds in Massachusetts are located in Boston, although the city represents only 10% of the state's population.

- Since January 1984, over $44 million of public, private and foundation funds has been allocated for programs and projects to serve the homeless population in Boston. City resources totalling $21.7 million have levered almost $23 million in additional funding.

- Boston's HealthLink Program at Boston City Hospital has provided comprehensive medical services to Boston's homeless population. Since 1985, HealthLink's teams of doctors, nurses and social workers have served over 8,000 persons.

- As Chairman of the United States Conference of Mayors Task Force on Hunger and Homelessness, Mayor Flynn worked with other mayors from across the country, homeless advocates, and Congressional leaders to fight for the enactment of the federal Stewart B. McKinney Homeless Assistance Act. Boston has already received $4.2 million in McKinney funds, which have been used by 87 non-profit agencies for a variety of housing, food, and health care programs.

- Despite the dramatic decline of federal housing programs, the Flynn Administration has mobilized every resource at its disposal to both preserve and produce affordable housing. Strong safeguards are in place for renters. The city has had over 13,000 housing starts since January 1984, the highest of any comparable-size city. The number of vacant public housing units awaiting rehabilitation has declined from 3,750 to 900, with full occupancy scheduled for 1991.

- A key element of the Flynn Administration's approach has been to go beyond basic shelter needs and to help homeless persons become more independent and self-sufficient. The cornerstone of this approach involves developing such programs as transitional and single-room occupancy (SRO) housing, job training and health care.

III. INTRODUCTION

In the past five years, the City of Boston has made the issue of homelessness a top priority. It has devoted substantial City resources to address the needs of Boston's homeless population. And it has worked closely with the State, religious and non-profit groups, trade unions, and other institutions to deal with this problem.

This winter, we can again say that **no homeless person in Boston will be denied a bed, a meal, decent health care, and transportation to a shelter.**

Few other cities can make this statement. It is unfortunate that even such a minimal standard of meeting basic human needs requires such an all-out effort, and that it is left to local and state government, and charitable organizations, to mobilize the resources to do so. But until federal priorities change, it is necessary to use whatever resources can be mustered to meet this challenge.

During the past year, however, the Flynn Administration has worked hard to go beyond basic shelter needs in dealing with the homeless population. The City government has sought to devise programs and policies that help homeless persons move into the mainstream. This involves developing such programs as transitional housing, job training, and health care, that assist the homeless person to become more self-sufficient and independent. We do not claim that we have reached this goal. What we have accomplished, however, is to develop model programs that can be expanded if adequate resources become available.

The ultimate goal is **not** to provide better emergency shelters, or better soup kitchens. The ultimate goal is to eliminate the need for emergency shelters and soup kitchens. But that will take a substantial commitment of federal government resources to a wide range of housing, social service, and anti-poverty programs. In the meantime, our primary task is to serve the immediate needs of Boston's homeless — to stretch our limited resources to address this critical problem.

IV. THE WINTER PLAN

The people of the City of Boston have made a commitment that, this winter, no one will be denied a warm bed, a hot meal, quality health care, and transportation to shelters.

This winter, the Flynn Administration has supported several initiatives which will move us forward in the fight against homelessness.

Overflow Shelters

In conjunction with the state government, Pine Street Inn, and Positive Lifestyles, the Flynn Administration coordinated efforts to insure that every person will have shelter during this winter. Five hundred shelter beds will be added. Four hundred of these beds will be added for the winter season — 200 at the Braintree Armory (operated by the Pine Street Inn) and 200 at Boston University (operated by Positive Lifestyles, Inc.).

One hundred additional permanent beds will also be opened at Boston City Hospital.

A vacant laundry building at Boston City Hospital will be the site of the City's newest emergency shelter, as Boston continues to expand its emergency bed capacity.

Boston's Long Island Shelter will operate this new 160-bed facility. This reflects the addition of 100 beds to the City's shelter operations. The other 60 beds will be transferred from the BCH Intake Center, where overflow shelter has been provided for women. Renovations to the laundry building are under way to make the space appropriate for use as a shelter. Grants obtained through the federal McKinney Act, as well as the City's Public Facilities Department, will pay for the approximately $750,000 in renovations. The new facility, which will open this winter, will allow the City to expand its day programs and its nursing clinic for the homeless. It will also provide office space for job counseling.

Transportation

Last winter, the Long Island Shelter began operating a homeless services van to transport people to overflow shelter and to reach out to others on the street in the evening hours. The Pine Street Inn also operates a rescue/outreach van from 9 p.m. to 5 a. m. daily. Both vans have proved to be vital in making sure that people have access to shelter, medical care, as well as blankets and hot drinks for those individuals who do not desire transportation to a shelter. The Long Island shelter van service will be expanded this winter to meet the needs of an increasing number of homeless persons through the generosity of Red Sox player Dwight Evans. Evans

"Mayor Flynn has made it clear from his first day in office that the homeless in Boston would be provided for. His administration has not only developed transitional and permanent housing to attack the root causes of homelessness, but has also insured that there will always be enough emergency shelter for those in need."

Richard Ring,
Director,
Pine Street Inn.

Boston's Homeless Transportation Van

has donated the vehicle he was given for being selected winner of the "Tenth Player" award.

The Boston Police Department has played an important and sensitive part in providing transportation and assistance for the homeless. Police officers who see homeless on the streets on cold nights offer transportation to shelters, or arrange for a homeless services van to make contact with the homeless person.

Health Care

Since 1985, Boston's HealthLink program has provided comprehensive health care services for the City's homeless population. Through this program, health care teams — consisting of committed doctors, nurses, and social workers—travel to over forty shelters, day programs, meal sites and hospitals to provide health care to guests at these locations. HealthLink, headquarterd at Boston City Hospital, is one of nineteen programs initially funded by the Robert Wood Johnson Foundation. Boston received a four-year $1.4 million grant, which has been matched with funds from the City government, the state government, private philanthropy and, most recently, federal McKinney funds.

Since its inception, HealthLink has treated over 8,000 persons (in over 23,000 patient visits), including many children residing in family shelters and hotels. The program is designed to bring the homeless into the mainstream of the health delivery system. One of its major strengths is that it provides continuity of care, which links the clinics at shelters with regular hospital services. Health care teams keep records on each individual's medical history and treatment and provide follow-up care. When admission to a hospital is necessary, the HealthLink staff visits patients at least twice each week. In addition to basic medical services, HealthLink has initiated a

dental program, an optometry program (including the provision of eyeglasses for homeless persons), and several other specialized programs to meet the particular needs of this at-risk population.

HealthLink is also responsible for greatly reducing the incidence of tuberculosis among homeless people.

Dedicated Volunteers

There are many factors that contribute to the success of the Boston's programs for the homeless people. Perhaps most important are the volunteers and the donations of time, clothing, furniture, and food.

Emergency shelter and feeding programs rely heavily on the volunteer labor and donations. In fact, it is safe to say that many programs would not be able to function with so many dedicated and hardworking volunteers. In Boston, the efforts of volunteers and other in-kind donations have been valued at approximately $50 million per year. Clearly, without the generosity of many Bostonians, the level of services being provided would be dramatically lower.

Friends of Long Island Shelter

Friends of Long Island Shelter is a private, non-profit volunteer organization made up of concerned individuals, religious organizations, and businesses from the Greater Boston area. Its main goal is to raise private funds to support the Long Island Shelter's efforts to help guests move into the mainstream. The chairman of Friends is John Rosenthal, a local businessman.

The Friends' current project is to help participants in the shelter's Work Experience Program (WEP). Plans are under way to establish a transitional program in Jamaica Plain to House ten WEP participants. While adjusting to the more stable

community environment, they will continue to work at the shelter. The house (donated by the City) will have staff providing support and guidance to the residents during their transition from shelter life to the community. The Friends are raising funds to help rehabilitate and operate the house.

V. HOMELESSNESS IN BOSTON TODAY

Like most cities, Boston has always had a "homelessness" problem. There have always been some persons who, for varied reasons, had no permanent shelter. For reasons described later above, however, the 1980s have witnessed an upsurge in homelessness across America — including Boston. As described below, the composition of the homeless population has changed as well. The "new homeless" include families with children, persons with jobs but inadequate income to afford housing, and persons suffering from mental illness for whom there is no social support or ongoing treatment.

Another trend among Boston's homeless population has become increasingly evident. Shelter providers report that a growing number of homeless persons are coming to Boston from outside the City. For example, a survey by Professor Russell Schutt of the University of Massachusetts found that 40.8 percent of the guests at the City's Long Island Shelter came from outside Boston — 22.6 percent were from within Massachusetts and another 18.2 percent came from outside the state. Other shelter providers estimate that the number of guests from outside Boston is even higher — up to half. Boston has become, in effect, a magnet for the homeless. This may be due, in part, to the large number of emergency shelter beds in Boston and because of the City's reputation for assisting the homeless in a variety of ways. For example, Boston has two-thirds of the emergency shelter beds in the entire state, although it has only 10 percent of the state's population. Boston, of course, has an "open door" policy when it comes to serving the homeless.

No one knows the exact number of homeless persons in Boston. Getting an accurate count — much less obtaining a profile of their characteristics, backgrounds, and needs — is obviously no easy task. Because the homeless lack a permanent address, they are difficult to find. Because many (perhaps a growing number) of homeless persons (particularly families) are neither on the streets or in shelters, but are living in overcrowded housing, they are "invisible" to those who seek to serve them. Because many homeless persons, even those on the street, look the same as other persons, they are difficult to identify. Because many homeless people are fearful of strangers, it is difficult to obtain an accurate profile of such characteristics as age, medical history, last permanent address, or the immediate causes for their homelessness.

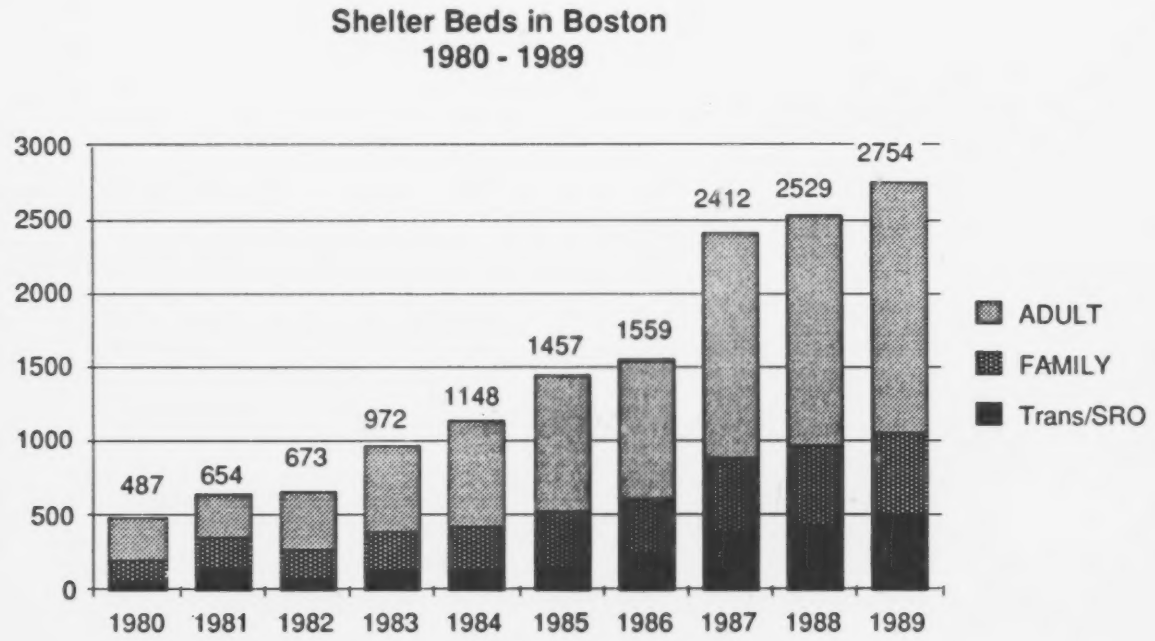
The last effort to obtain a census of Boston's homeless took place in February 1988. Working closely with Boston's shelter providers and homeless advocates, the City's Emergency Shelter Commission sponsored a one-night census. It sought to identify every homeless person in shelters, hotels, and on the street, including subway stations, alleyways, cars, hospital waiting rooms, Logan Airport terminals, and other semi-public places. It did not attempt to locate persons who found shelter, however inadequate, in overcrowded or abandoned apartments — the invisible homeless.

This census reported a homeless population in Boston of 3,493 persons. Adult men accounted for 63 percent of this population. Adult women accounted for 22 percent. Children accounted for 15 percent. All of the children were living in shelters or hotels; none were found on the street. The total number reflects an increase from the 2,863 homeless persons found in a similar census about one year earlier.

Increase in Shelter Beds

Since 1983, the number of shelter beds in Boston has increased from 972 to 2,754. This represents a 183 percent growth. These shelter beds include adult shelters, family shelters, and transitional housing programs. Three large

BOSTON SHELTERS FOR THE HOMELESS



shelters — the City's Long Island Shelter (360), the new Boston City Hospital shelter (160 beds), and the Pine Street Inn's Fort Point Shelter (300 beds) — account for a large portion of the overall increase. However, there has also been a sizeable increase in the number of beds in small-and medium-size shelters sponsored by the state government and by non-profit organizations.

These 2,754 emergency and transitional beds — in addition to the 400 "overflow" beds and the approximately 350 beds available in area hotels — make it possible to insure that no homeless person in Boston will be denied a bed for the night.

The following tables reflect the year-by-year increase of shelter beds in Boston. They are divided into adult, family, and transitional/SRO housing.

BOSTON SHELTERS FOR THE HOMELESS

Shelter	Neighborhood	Number of Beds									
		1980	1981	1982	1983	1984	1985	1986	1987	1988	1989
Adult Shelters											
Day is Done	Fenway	—	—	—	—	12	12	12	12	12	12
Harbor Light Center	South End	37	37	37	37	37	37	35	35	35	38
Pine Street Inn	South End	240	350	350	350	350	350	350	350	350	390
St. Paul's (Pine Street Inn)	Dorchester	—	—	—	—	—	50	50	50	50	50
Fort Point	South Boston	—	—	—	—	—	—	—	300	300	300
Rosie's Place	South End	10	10	15	15	13	16	20	20	20	20
Shattuck	Jamaica Plain	—	—	—	120	100	100	100	200	200	200
Sancta Maria	South End	—	—	—	9	9	9	10	10	10	10
Kingston House	Downtown	—	—	—	—	—	—	—	60	60	60
Long Island	Harbor Islands	—	—	—	100	200	360	360	360	360	360
Boston City Hospital	South End	—	—	—	—	—	—	—	60	60	160
Council of Elders	Roxbury	—	—	—	—	—	—	—	—	38	38
Night Drop-In	Downtown	—	—	—	—	—	—	—	60	60	60
Subtotal		287	297	402	631	721	934	937	1517	1555	1698

BOSTON SHELTERS FOR THE HOMELESS

Shelter	Neighborhood	Number of Beds									
		1980	1981	1982	1983	1984	1985	1986	1987	1988	1989
Family Shelters											
Casa Myrna Vazquez Safe Homes	South End	25	25	25	25	25	25	15	25	25	25
Mary Foreman	Dorchester	—	22	22	22	22	22	22	22	22	24
FINEX House	JP/Dorchester	—	20	20	20	20	20	20	35	35	36
Agnes Owens	Roxbury	—	—	—	—	—	30	50	50	50	—
Boston Family Shelter	South End	—	—	—	35	35	35	28	28	28	28
Crossroads	East Boston	—	—	—	—	—	35	35	35	35	35
Salvation Army	Roxbury	14	14	—	15	15	15	18	18	18	19
RMSC Family House	Dorchester	—	—	—	—	37	37	42	50	50	50
Project Hope	Dorchester	—	—	—	20	20	20	20	20	20	20
Sojourner House	Roxbury	—	20	20	20	20	20	20	20	20	20
Temporary Home	Downtown	45	45	45	45	45	45	45	45	45	45
Stone House	Jamaica Plain	9	10	18	18	18	18	18	18	18	19
Harbor Me	East Boston	18	18	18	18	18	18	18	18	18	19
Renewal House	Roxbury	9	9	9	9	9	9	9	9	9	13
YMCA F.I.T.	Fenway	—	—	—	—	—	—	—	85	85	79
Casa Myrna Vazquez Shelter	South End	—	—	—	—	—	—	—	—	—	15
Saint Andrew's	Jamaica Plain	—	—	—	—	—	—	—	16	16	16
Bostonian Chambers I	Dorchester	—	—	—	—	—	—	—	—	22	24
Bostonian Chambers II	Dorchester	—	—	—	—	—	—	—	—	24	26
Lifehouse I	Dorchester	—	—	—	—	—	—	—	—	—	14
Lifehouse II	Dorchester	—	—	—	—	—	—	—	—	—	15
Subtotal		135	198	192	262	299	364	375	509	540	542

BOSTON SHELTERS FOR THE HOMELESS

Shelter	Neighborhood	Number of Beds									
		1980	1981	1982	1983	1984	1985	1986	1987	1988	1989
Transitional Housing/S.R.O.s											
Parker Street	Downtown	65	50	50	50	50	50	50	50	50	50
Parker Street West	Jamaica Plain	—	—	—	—	—	—	25	25	25	25
Long Island (DMH)	Harbor Islands	—	—	—	—	—	—	42	42	42	42
Family House I	Dorchester	—	—	—	—	—	12	12	12	12	12
Family House II	Dorchester	—	—	—	—	—	—	—	—	18	18
Horizons House	Mattapan	—	—	—	—	—	19	19	19	19	19
John Leary House	South End	—	—	20	20	20	20	20	20	20	20
Rosie's Place	South End	—	—	—	—	—	—	11	11	11	11
Rosie's Place	Dorchester	—	9	9	9	9	9	9	9	9	9
Stone House	Roxbury	—	—	—	—	—	—	—	46	46	46
Sunderland House	Roxbury	—	—	—	—	—	—	—	35	35	—
Boston Aging Concerns	Back Bay	—	—	—	—	16	16	16	16	16	16
Boston Aging Concerns	Fenway	—	—	—	—	23	23	23	23	23	23
Boston Aging Concerns	South End	—	—	—	—	—	—	—	—	30	30
Paul Sullivan I	Dorchester	—	—	—	—	—	—	10	10	10	10
Paul Sullivan II	Dorchester	—	—	—	—	—	—	—	10	10	10
Paul Sullivan III	Downtown	—	—	—	—	—	—	—	—	—	16
Morris Building	Harbor Islands	—	—	—	—	—	—	—	20	20	24
Eliz. Stone House	Jamaica Plain	—	—	—	—	—	—	—	14	14	14
Bridge House	Brighton	—	—	—	—	10	10	10	10	10	10
Bridge Extension	South End	—	—	—	—	—	—	—	14	14	14
Bridge-Eliot Complex	Brighton	—	—	—	—	—	—	—	—	—	28
Operation Food, Inc.	Mattapan	—	—	—	—	—	—	—	—	—	10
Renewal Center	Roxbury	—	—	—	—	—	—	—	—	—	10
Casa Myrna Vazquez	South End	—	—	—	—	—	—	—	—	—	8
STAIR	Mattapan	—	—	—	—	—	—	—	—	—	8
Subtotal		65	59	79	79	128	159	247	386	434	514
TOTAL		487	654	673	972	1148	1457	1559	2412	2529	2754

VI. CITY RESOURCES FOR THE HOMELESS

Since 1984, over $44 million has been spent in the City of Boston for homeless programs. (This is in addition to the many city initiatives to safeguard and expand affordable housing.) The City of Boston has allocated over $21 million in resources. These City funds have levered about an additional $23 million in state, federal, and foundation, and private funds for homeless services and shelters. The City's allocations include the following:

1.	Development and operation of Long Island Shelter	$6,448,964
2.	Disposition of City-owned property	$4,426,500
3.	Capital grants for development	$6,661,309
4.	Low-interest loans for development	$1,022,675
5.	Operating grants for shelters	$1,211,449
6.	HealthLink	$400,000
7.	Housing counseling grants to non-profit groups	$559,000
8.	Emergency Shelter Commission	$776,613
9.	Elderly Affairs Commission	$268,806
Total		$21,775,316

Long Island Shelter

The Long Island shelter (and the in-take center and women's shelter at Boston City Hospital) is a major component of the City's efforts to serve the homeless. Located on the grounds of the Long Island Hospital, this facility opened in January 1983 with 100 beds. It currently provides 420 beds each night, making it the second largest shelter in Massachusetts. Since January 1984, the city has spent $6.45 million to renovate and operate the shelter and in-take center. Each year, the city has improved the physical facilities as well as the day-to-day operation of the shelter. It has also added programs — such as job training and counseling — to help shelter guests move into the mainstream.

Disposition of City-owned Property

Since January, 1984, the Flynn Administration has sold City-owned parcels to non-profit groups for the development of emergency shelters, transitional housing, and lodging houses. The total

estimated appraised value of these parcels — sold for as little as one dollar each — is $4,426,500. Groups such as Boston Aging Concerns, Rosie's Place, Shelter, Inc., Casa Esperanza, Horizons House, Elizabeth Stone House, Paul Sullivan Lodging House Trust, FINEX House, and the Family House have been transforming empty and vacant lots into much-needed shelters and housing. Non-profit groups have met increasing difficulty in purchasing property in Boston's strong real estate market. By foregoing over $4.4 million in potential sales revenue, the City has provided these groups with development opportunities that would otherwise be unavailable.

Capital Grants for Development

Twenty-one non-profit groups have received grants totaling more than $2,161,309 from the City to develop shelters and other facilities to serve the homeless. These groups include Casa Myrna Vazquez, Women, Inc., Hope House, Cape Verdean Community center, Casa Esperanza, Boston Aging Concerns, FINEX House, Horizons House, Paul Sullivan Lodging Trust, the Greater Boston YMCA, and others. These funds have been used for construction and rehabilitation.

Low-interest Loans for Development

Several groups — including Paul Sullivan Trust, Boston Aging Concerns, Elizabeth Stone House, and Casa Myrna Vazquez — have received low-interest loans totaling $1,022,675 to assist in the development of programs for the homeless.

Operating Grants

A number of non-profit groups — Saint Francis House, Project Hope, Horizons House, Crossroads, Place Runaway, Massachusetts Coalition for the Homeless, and Roxbury Multi-Service Center — and others have received a total of $1,211,449 in operating grants. These funds covered day-to-day expenses of programs providing shelter and services to the homeless.

HealthLink

Since July, 1985, Boston has provided comprehensive health care services for homeless persons through HealthLink, a program described elsewhere in this report. Through the Department of Health and Hospitals, the City has contributed $400,000 to HealthLink, in part through in-kind office space and equipment.

Housing Counseling

The City has allocated $559,000 in CDBG and Gateway Cities funds to nine, neighborhood-based, non-profit groups for housing counseling services to homeless and low-income persons. These groups work with local shelters, CDCs, anti-poverty agencies, and the Boston Housing Authority to help low-income persons find housing.

Emergency Shelter Commission

The Emergency Shelter Commission (ESC) serves as the City's liaison with Boston's emergency shelters and advocacy groups, assists homeless persons in finding shelter, works with Boston's legislative delegation to provide programs and resources to serve the homeless, and sponsors research on homelessness in Boston. The ESC, for example, has sponsored several censuses of Boston's homeless population. It also sponsored several meetings to assist Boston non-profit groups to apply for federal McKinney funds. Since January, 1984, the City has allocated $776,613 for the ESC and for a housing

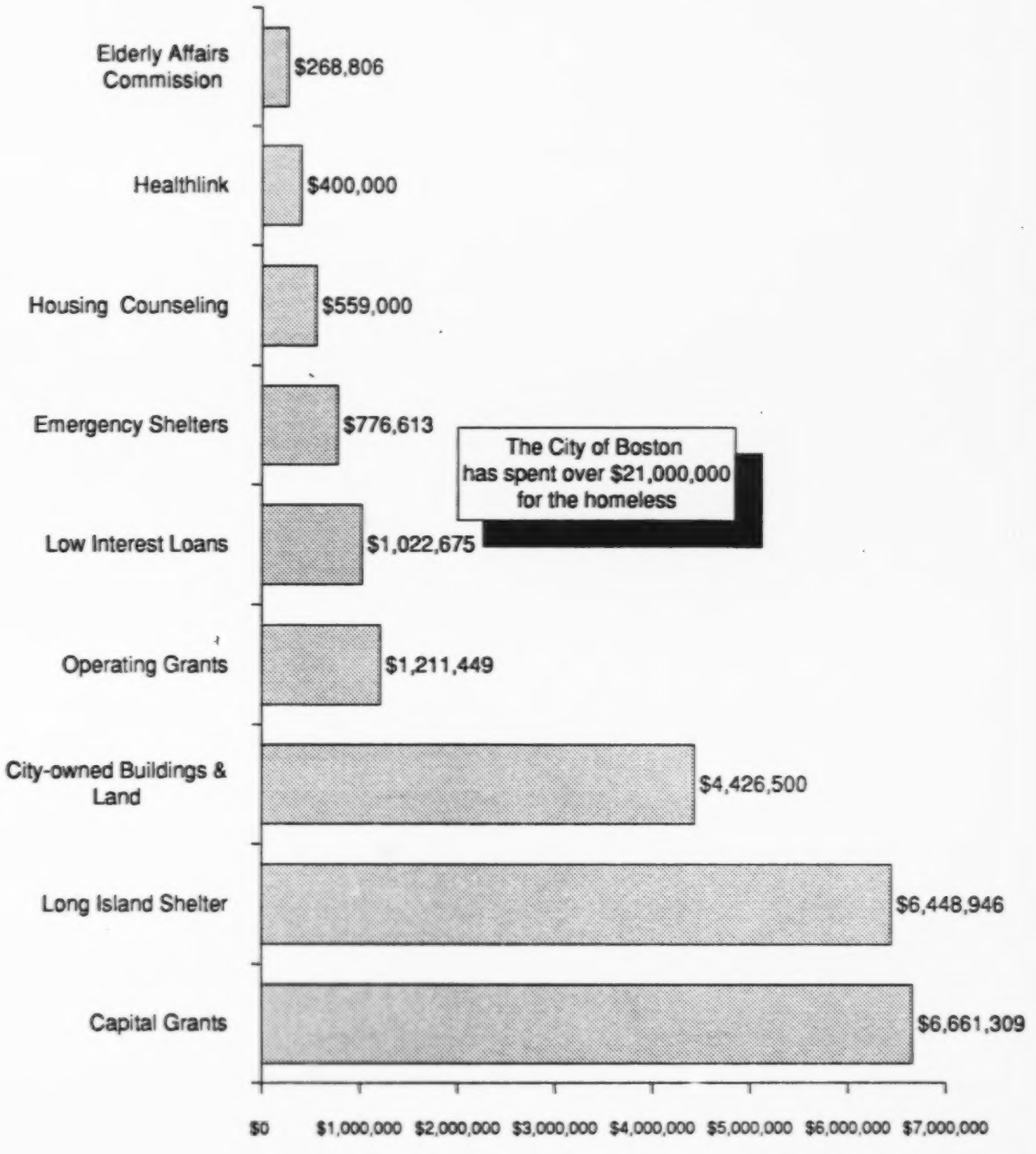
counselor in the Mayor's Office of Neighborhood Services.

Elderly Affairs Commission

This City agency provides a variety of services to assist homeless elders. Since January 1984, it has allocated $268,806 to provide housing counseling to elderly persons who are homeless or who are facing eviction and the threat of homelessness. An additional grant of $75,000 was allocated to Kit Clark Senior House for a meal program serving the elderly homeless. Another $35,000 was granted to Boston Aging Concerns to provide tenant education and legal and technical assistance to prevent elderly persons from becoming homeless.

Mayor Flynn Recently Appointed Michael McGuire, a Guest at Long Island Shelter, as a Member of the Emergency Shelter Commission.

City Resources for the Homeless



City Resources for the Homeless

1. Long Island Shelter

AGENCY	SHELTER TYPE	AMOUNT	STATUS
CITY OF BOSTON	ADULT SHELTER	$6,448,964	COMPLETE

2. Publicly owned Buildings and Land

AGENCY	SHELTER TYPE	AMOUNT	STATUS
ELIZABETH STONE	TRANSITIONAL	$17,000	COMPLETE
FINEX	BATTERED AND HANDICAPPED WOMEN	$40,000	COMPLETE
FAMILY HOUSE	TRANSITIONAL	$30,000	COMPLETE
ROSIE'S PLACE	SHELTER	$352,000	COMPLETE
BOSTON AGING CONCERNS	LODGING HOUSE	$800,000	COMPLETE
CASA ESPERANZA	DETOX	$64,500	COMPLETE
ARCHDIOCESE/SHELTER, INC.	FAMILY SHELTER	$50,000	DESIGNATED
FAMILY HOUSE II	TRANSITIONAL	$90,000	CONSTRUCTION
HOMELESS WOMEN'S HOUSING INITIATIVE	TRANSITIONAL	$50,000	DESIGNATED
VETERANS BENEFITS CLEARINGHOUSE	LODGING HOUSE	$100,000	DESIGNATED
PROJECT INDEPENDENCE	CO-OP/DAY CARE	$33,000	DESIGNATED
HELEN MORTON CENTER	TRANSITIONAL	$2,800,000	DESIGNATED
SUBTOTAL		**$4,426,500**	

3. Capital Grants for Development

AGENCY	SHELTER TYPE	AMOUNT	STATUS
AGNES OWENS/ CAPE VERDEAN	FAMILY SHELTER	$42,000	COMPLETE
ELIZABETH STONE	TRANSITIONAL	$170,000	COMPLETE
ELIZABETH STONE	WOMEN IN CRISIS	$42,413	COMPLETE
FINEX	HANDICAPPED	$40,000	COMPLETE
HOPE HOUSE	DETOX	$177,500	COMPLETE
HORIZONS	TRANSITIONAL	$120,000	COMPLETE
PAUL SULLIVAN TRUST	LODGING HOUSE	$55,000	COMPLETE
PROJECT PLACE	DAY PROGRAM	$90,000	COMPLETE
SHELTER, INC.	FAMILY SHELTER	$17,165	COMPLETE
YMCA	FAMILY SHELTER	$50,000	COMPLETE
DMH/MORRIS BUILDING	DUAL DIAGNOSIS DETOX	$237,361	COMPLETE
BOSTON AGING CONCERNS	LODGING HOUSE	$255,000	COMPLETE
CASA ESPERANZA	DETOX	$158,500	COMPLETE
CASA MYRNA VAZQUEZ	TRANSITIONAL	$56,080	COMPLETE
FIRST, INC.	DETOX	$107,802	COMPLETE
WOMEN, INC.	DETOX	$91,870	COMPLETE
VICTORY HOUSE	DETOX	$15,750	COMPLETE
PAUL SULLIVAN TRUST	LODGING HOUSE	$140,000	COMPLETE
GREATER BOSTON YMCA	FAMILY SHELTER	$50,000	COMPLETE
INTERIM HOUSE	ALCOHOLIC REHAB	$27,000	COMPLETE
GAVIN HOUSE	ALCOHOLIC REHAB	$37,500	CONSTRUCT
BOSTON HAMILTON	ALCOHOLIC REHAB	$30,000	COMPLETE
OPERATION FOOD	TRANSITIONAL	$150,000	PRECONST.
HELEN MORTON CENTER	TRANSITIONAL	$4,500,000	DESIGNAT.
SUBTOTAL		**$6,661,309**	

4. Low-Interest Loans

AGENCY	SHELTER TYPE	AMOUNT	STATUS
ELIZABETH STONE	TRANSITIONAL	$91,500	COMPLETE
PAUL SULLIVAN TRUST	LODGING HOUSE	$79,175	COMPLETE
PAUL SULLIVAN TRUST	LODGING HOUSE	$70,000	COMPLETE
BOSTON AGING CONCERNS	LODGING HOUSE	$390,000	COMPLETE
COUNCIL OF ELDERS	LODGING HOUSE	$185,000	PRECONST
CASA MYRNA VAZQUEZ	TRANSITIONAL	$60,000	COMPLETE
300 SHAWMUT AVENUE	LODGING HOUSE	$147,000	CONSTRUCT
SUBTOTAL		**$1,022,675**	

5. Operating Grants

AGENCY	SHELTER TYPE	AMOUNT	STATUS
HORIZONS	TRANSITIONAL	$143,000	COMPLETE
PLACE RUNAWAY	TEEN SHELTER	$45,000	COMPLETE
ST. FRANCIS HOUSE	DAY PROGRAM	$421,000	COMPLETE
PROJECT HOPE	FAMILY SHELTER	$101,500	COMPLETE
CROSSROADS	FAMILY SHELTER	$34,000	COMPLETE
RMSC FAMILY HOUSE	FAMILY SHELTER	$16,000	COMPLETE
MASS. COALITION	WAREHOUSE	$16,000	COMPLETE
MY SISTER'S PLACE	ADVOCACY	$40,368	COMPLETE
CAZA MYRNA VAZQUEZ	TRANSITIONAL	$15,000	COMPLETE
CENTER HOUSE	DAY PROGRAM	$30,000	COMPLETE
ELIZABETH STONE HOUSE	TRANSITIONAL	$50,000	COMPLETE
HARBOR LIGHT CENTER	ADULT SHELTER	$30,000	COMPLETE
TRAVELERS AID SOCIETY	CRISIS INTERVENTION	$28,781	COMPLETE
SUBTOTAL		**$1,211,449**	

6.	**HealthLink**	$400,000
7.	**Housing Counseling**	
	CAZA MYRNA	$20,000
	UNITED SOUTH END SETTLEMENTS	$100,000
	ROXBURY MULTI-SERVICE CENTER	$105,000
	BOSTON AGING CONCERNS	$95,000
	BOSTON INDIAN COUNCIL	$21,000
	CAPE VERDEAN COMMUNITY CENTER	$30,000
	NEIGHBORHOOD OF AFFORDABLE HOUSING (NOAH)	$70,000
	OFICINA HISPANA	$70,000
	URBAN EDGE	$48,000
SUBTOTAL		**$559,000**
8.	**Emergency Shelter Commission**	$776,613
9.	**Commission on Elderly Affairs**	$268,806
	GRAND TOTAL	**$21,775,316**

VII. COMPREHENSIVE POLICIES AND PROGRAMS

Homelessness: A National Problem

There have always been homeless people in this country — particularly during periods of economic distress. But, as a recent report by the eminent National Academy of Sciences observed, "the number of homeless people (has) increased dramatically within the last several years." Although some may view the 1980s as a decade of economic recovery, this increase in homelessness — along with a startling increase in the number of Americans who are at-risk of becoming homeless — betrays the notion of "rising tide" that "lifts all boats." A growing number of Americans are simply not in the boats.

Equally troubling is the changing composition of the homeless population. As described in more detail below, the fastest growing segments of the homeless population are **families with children, the working poor,** and **Vietnam-era veterans.**

The upsurge of homelessness challenges the conscience of this great nation — and this great City. But while the federal government has in recent years turned its back on the homeless, Boston residents have met the challenge head-on. A partnership of City government and non-profit organizations — working with private foundations, the state government, and others — have stretched their resources to help meet the housing, health care, social services and other needs of the homeless.

Between 1984 and today, City resources totalling over $44 million have been allocated to homeless programs. On a per capita basis, this is one of the highest allocations of any major city in the country. Moreover, these funds have leveraged almost $23 million in private sector, foundation, and other government support.

It is heartening to see how Boston residents — like their counterparts across America — have responded to the tragedy of homelessness in their community. **But the truth is that local governments and volunteer non-profit groups simply lack the resources to meet the growing need.**

If the record number of people on America's streets had been driven there by a natural catastrophe, many states would be declared disaster areas — and federal dollars would flow to deal with the consequences. But even though homelessness is a national problem, caused by national policies, the the federal goverment has given only lip-service to the issue.

Last year, after suffering seven years of brutal federal cutbacks, homeless advocates scored a significant victory. As chair of the U.S. Conference of Mayors Task Force on

"Homelessness is a national disaster. The federal government has retreated from its responsibility when dealing with both homelessness and affordable housing and in so doing has placed the burden on state and local governments. Until the federal government or Congress returns to the spending levels of the past the problem will only get worse."

Mitch Snyder
Community for Creative Non Violence,
Washington, D.C.

Hunger and Homelessness; Mayor Flynn worked with a coalition of advocates — including the National Coalition for the Homeless, Mitch Snyder, and the National Low-Income Housing Coalition — to "raise consciousness" about the homeless problem and encourage Congress to address the issue. Speaker Jim Wright led a bipartisan effort to enact the first significant federal legislation on homelessness during the 1980s. Passed in June 1987, the bill was named for Representative Stewart B. McKinney, a Republican from Connecticut, who co-sponsored the legislation and who died in April of that year.

In its first two years (FY 1987 and 1988), Congress authorized over $1 billion in the McKinney Act funds for housing, health care, and social services for the homeless, but appropriated only $700,000. The Reagan Administration sought to cut McKinney funds this year. Congress authorized another $633.8 million, but only appropriated $378 million, for FY 1989. As this report describes, the Flynn Administration worked hard to assure that Boston's non-profit groups received a significant part of the McKinney Act funding. So far, Boston has been awarded over $4 million in McKinney funds.

Unfortunately, the gain in McKinney funds have been more than offset by the federal government's cutbacks for housing assistance for the poor. While the McKinney programs help cities to meet the immediate needs of this vulnerable population, **it is no substitute for a comprehensive federal housing and anti-poverty program.**

The Homeless: How Many? Who? Why?

Like most American cities, Boston has experienced a rising tide of homelessness during the 1980s.

It is difficult to obtain precise, reliable figures for the total number of homeless persons in the United States. Nationwide estimates range from 250,000 to 2 million. What is clear is that the numbers are growing. For example, a 1987 survey by the U.S. Conference of Mayors Task Force on Hunger and Homelessness, chaired by Mayor Flynn, found that demand for emergency shelter in cities rose by an annual average of over 20 percent for three consecutive years. A 1987 survey of homelessness among families found that the number of families seeking emergency shelter had increased by 31 percent in two years. Almost one quarter of the homeless worked either full time or part time — but earned wages too low to afford housing.

Studies in cities across the country indicate that today's homeless population is a diverse group of men, women, and children. Some live alone; a growing number live as members of families. Some are mentally ill or alcoholics. As a group, today's homeless population is different from the "skid row" homeless of the past that was dominated by men in their fifties and sixties.

The growing number of homeless in the United States is the result of three basic causes, each linked to a **failure of federal government policy.**

- **Housing Cutbacks**

Since 1981, the federal government has all but dismantled the nation's housing programs. While the housing crisis deepens, housing programs have been the hardest hit by budget cuts. The HUD budget has been cut from over $33 billion in 1980 to under $8 billion today — a 75 percent reduction. HUD spending was approximately 7 percent of the federal budget in 1978. Today, it is about 1 percent. During the 1970s, as many as 300,000 federally assisted housing units were built annually. This year, we will be lucky to reach 15,000. In addition, a substantial portion of the existing inventory of almost

two million units of federally subsidized, privately owned apartments, constructed in the 1960s and 1970s, are at risk as a result of expiring subsidies. Further, the 1986 federal tax reform act removed most incentives for producing and preserving low-income housing.

- **Increasing Poverty**

In 1986, 32.4 million Americans lived below the poverty line, an increase of over three million poor since 1980. According to a recent U.S. Census report, the gap between rich and poor families has grown wider — reaching its widest point in at least 40 years. The poor have grown poorer. According to the Center on Budget and Policy Priorities, poor families are now further below the poverty line than at any time since 1963. The Center attributes the growing number of low-income Americans to federal cutbacks in housing, job training, food stamps, health care, nutrition, and other programs, as well as the failure of Aid to Families with Dependent Children (AFDC) benefits — which are state programs matched by federal dollars — to keep pace with inflation. Federal cutbacks have cut huge holes in the so-called "safety net." Further, the percentage of unemployed persons who receive unemployment insurance benefits has declined.

- **Deinstitutionalization**

A substantial segment of America's homeless is comprised of mentally ill persons. They are the victims of the failed policy of "deinstitutionalization" begun in the 1960s, which emptied our nation's mental hospitals without providing adequate resources for community-based facilities. Nationwide, the number of persons institutionalized in mental hospitals declined from 505,000 in 1963 to 138,000 in 1980. The nation's homeless shelters are often the agencies of last resort for these mentally ill persons. Many shelters have become, de facto, American's new mental institutions. About one-third of the nation's mentally ill persons are homeless. Instead, what is needed is adequate funding to support community-based residential facilities as well as social services for the mentally ill.

Mayor Flynn Serving Holiday Dinner at Harbor Lights Shelter

Three-Part Approach

When the Flynn Administration took office in January 1984, the issue of homelessness had only recently become a matter of major public concern across the country. A major theme of Raymond Flynn's mayoral campaign — to include Boston's poor and working families in the benefits of the city's economic prosperity — was obviously relevant to those who had no place to live.

As a member of the City Council, Ray Flynn had previously sponsored legislation that created the Emergency Shelter Commission, a city agency with the responsibility for coordinating efforts to serve the homeless. As Mayor, he has made the concerns of the homeless a central focus of City policy and priorities.

Addressing the issue of homelessness requires a comprehensive approach to the problem. It calls for three kinds of activities.

First, it is necessary to assist the homeless in meeting their basic needs for housing, food, health care, and social services so that they can live with dignity and respect. This, however, deals with the symptons of a much deeper set of social and economic problems. This first approach recognizes that, despite its limited resources, the City government is on the "front lines" of the homelessness problem and must do everything within its authority to improve the daily lives of the city's homeless population. Mayor Flynn has called on the good will of Boston's residents in finding locations for homeless shelters and services. The creation of these programs requires more than bricks, mortar and money. It also requires the willingness of neighborhood residents to make room for the needy within the fabric of their communities. A key part of the Flynn Administration's efforts has been to work closely with Boston residents to site these programs in a way that respects both the dignity of homeless persons and the integrity of neighborhoods.

Second, policies and programs must recognize the diversity of the homeless population. The homeless are not a monolithic group. As the recent National Academy of Sciences report, **Homelessness, Health, and Human Needs,** pointed out: "Homeless people are a diverse and varied group in terms of age, ethnicity, family circumstances, and health problems. Moreover, the characteristics of the homeless population differ dramatically from one community to another." Stereotypes about the homeless inevitably fail to reflect the many paths to and faces of homelessness. Over the years, Boston's programs and policies have been increasingly sensitive to the reality of diversity and have sought to tailor programs and policies to address the range of needs found within the City's homeless population. The Flynn Administration has worked hard to **go beyond basic shelter needs** in dealing with the homeless population. The City government has sought to devise programs and policies that help homeless persons move into the mainstream. This involves developing such programs as transitional housing, job training, and health care, that assist the homeless person to become more self-sufficient and independent. We do not claim that we have reached this goal. What we have accomplished, however, is to develop model programs that can be expanded if adequate resources become available.

Third, it is necessary to raise public awareness about the plight of the homeless and the failed social and economic policies that have caused homelessness. Only by doing so will the public work with and exert pressure on elected officials to mobilize sufficient resources to solve the root causes of homelessness. We recognize that it is beyond the resources and authority of one city government to

meet all the needs of Boston's homeless. This will require decisive action on the part of the state government, the federal government, and the private sector. Mayor Flynn has worked with a wide range of advocates to place the issue of homelessness at the top of the agenda of these institutions.

Transitional Housing

Transitional housing represents an intermediate step between emergency shelter and permanent housing. It is designed to help homeless women (and their children) "get back on their feet" — to become more self-sufficient and independent. It combines aspects of apartment-living with various support programs, such as job training, child care, counseling, the others. Transitional housing is an important response to the growing reality of the "feminization of poverty." As a growing number of female-headed households with children enter the ranks of the homeless, it is critical to deal with the specific needs of this population.

The Flynn Administration has made a concerted effort to provide resources and support for transitional housing programs. It has provided grants to help non-profit groups design such programs. The Flynn Administration has provided City-owned land and buildings to site these programs. It has provided grants and loans to provide operating funds for transitional housing programs. Through his role with the U.S. Conference of Mayors, Mayor Flynn worked hard to make sure that the federal McKinney Act included specific funds targeted for the creation of transitional housing programs. Many Boston groups have already benefited from these McKinney funds.

Boston's existing transitional housing programs include the Elizabeth Stone House, Casa Myrna Vazquez, Horizons House, and others.

Elizabeth Stone House — Transitional Housing for 46 People

The transitional housing program that is currently in the development pipeline is the Helen Morton Family Center, originally called the "Tree of Life." Initiated by Mayor Flynn, it will include a comprehensive program for single women with children. The development calls for thirty-six units of transitional housing as part of a ninety-five-unit, mixed-income project, located on a large and valuable South End parcel owned by the Boston Redevelopment Authority. The thrity-six transitional units will be scattered throughout the larger development in identical brick, bow-front townhouses. A child care center, a tot lot, a community garden and an underground parking garage will also be integrated on the site. To enhance the financial feasibility of the project, the Flynn Administration "linked" the construction of this project with the Park Square office-condominium development. This office-condominium project will contribute about $5 million in "linkage" funds toward both the construction of the mixed-income South End development and an endowment for the operation of the Helen Morton Family Center transitional housing program. Earlier this year, Mayor Flynn appointed a Board of Directors, chaired by Attorney Vincent McCarthy, a well-known advocate for the homeless. This Board will design and operate the transitional housing program, including the child care center and the support services, that will help women and children move into the mainstream and live more independent lives. A groundbreaking is expected to take place during 1989.

Lodging Houses

Lodging houses— often called single-room occupancy (SRO) housing — serve as an important source of low-income housing. Many elderly residents on fixed incomes, many young people just starting out, and many people in transition rely on lodging houses for affordable housing. For many people, lodging house rooms are the only thing between affordable housing and homelessness.

Unfortunately, it recently seemed that this type of housing was becoming an endangered species. In the 1950s, Boston had approximately 25,000 lodging house rooms across the city. By 1968, 9,500 rooms remained. In early 1985, the City's Elderly Affairs Commission conducted a survey of lodging houses and found 243 licensed lodging houses, representing 3,310 rooms.

The Flynn Administration has taken the initiative to preserve existing lodging houses and even to create new Single Room Occupancy. The preservation efforts (described in the next section) and the creation efforts go hand-in-hand. Non-profit agencies now look at Single Room Occupancy as housing for a variety of people with special needs. Current lodging house operators now include providers of transitional housing for battered women, alcoholics, chronically mentally ill persons, homeless people, and frail elders, among others. In addition to this trend, there is now a renewed interest on the part of for-profit owners in retaining and/or developing lodging houses — typically for low-income working persons.

City agencies are now working on sixteen different lodging house projects. Five others have been completed in the past three years. Several more are in the early planning stages.

The Flynn Administration recently received a grant to examine ways to overcome obstacles to creating and preserving lodging houses. City agencies also intend to apply for federal funds this fall to provide Section 8 rental assistance for homeless people living in SROs.

Boston Aging Concerns Before Renovation

Boston Aging Concerns After Renovation 30 Units of SRO Housing

Safeguarding and Increasing Affordable Housing

The shortage of decent, affordable housing is the primary cause of homelessness. The Flynn Administration has developed a comprehensive housing policy designed to protect, preserve, and produce affordable housing. The withdrawal of the federal government has made this task overwhelmingly difficult, but the city government has used every resource at its disposal to make progress toward these goals.

Since 1984, the City has significantly strengthened the laws designed to protect renters from unfair rent increases, evictions and condo conversions. Two years ago, the City enacted a law designed to protect the inventory or rooming houses (also called single-room occupancy, or SRO housing), a form of low-rent housing which had dramatically declined due to the forces of gentrification. Under the new law, SROs cannot be converted to other uses without obtaining a permit from the Rent Equity Board. The law has already dampened the speculative sale of SRO buildings and made it possible for several non-profit organizations to purchase these buildings in order to preserve them for low-income residents.

Earlier this year, the City expanded the permit system to include most of the absentee-owned rental housing in the City. The City now has the authority to regulate the conversion of apartments to condominiums, a trend which had impacted more than 25,000 units in the past decade. No absentee-owned building can be converted from rental to condominium use without getting a permit from Rent Equity Board and without the support of at least half of the tenants. There is also a ban on evictions for condominium conversion for those renters who do not wish to purchase their apartments. The Flynn Administration also expanded the number of apartments protected from unfair evictions by extending the "just cause" eviction requirements.

Tenants are also protected from skyrocketing rents. Under the new tenants' rights laws, rents for elderly, handicapped and low-income tenants cannot exceed the Consumer Price Index each year; for other tenants, annual rent increases are limited to 10 percent.

Mayor Flynn also recently signed a new law extending the tenants' rights laws in subsidized housing. Boston has over 10,000 subsidized apartments which could lose their subsidized status

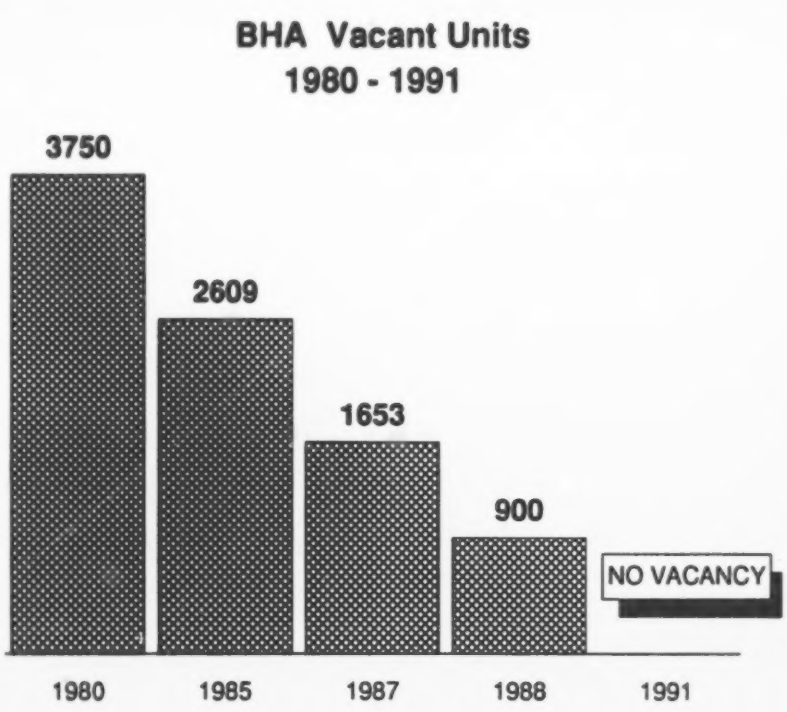
"The answer to homelessness is permanent affordable housing."

Sue Marsh
Mass. Coalition for the Homeless

should owners decide to pay off their below-market mortages after twenty years in order to convert to market-rate housing. Many Boston buildings, built in the 1960s and 1970s under various federal housing programs, face this possibility. Under the new law, tenants in buildings whose owners choose to do so will be protected by rent, eviction, and condominium conversion regulations.

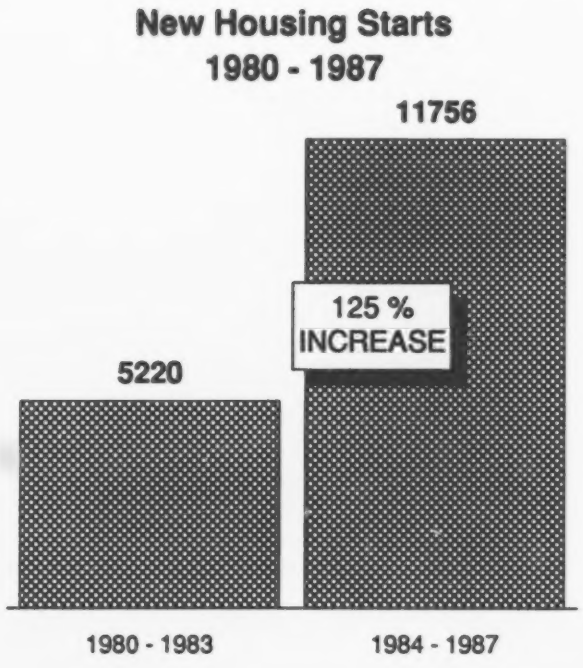
In addition, a large number of existing HUD-owned subsidized apartments were recently saved from the auction block by the efforts of a coalition of city, state, community, and business leaders. HUD agreed to sell about 1,000 subsidized apartments to non-profit Community Development Corporations, through the umbrella of the Boston Housing Partnership. These scattered apartment buildings, called the "Granite Properties," will be preserved for low-income use, managed by the CDCs, and subsidized by several kinds of subsidies from the City government, the state government, foundations, the United Way, and federal tax credits.

The Flynn Administration is also on schedule in its efforts to rehabilitate the vacant deteriorated apartments of public housing office. Only 900 units remain vacant and funding for restoration has been secured. Given the current pace of rehabilitation, the Boston Housing Authority can expect to reach its goal of full occupancy by the end of 1991.



During the past five years, Boston has witnessed a dramatic increase in overall housing starts. More than 13,000 housing units have been approved during that period. Each year, the number of affordable housing units has increased; last year, for example, close to half of the over 4,000 housing starts were targeted for low- and moderate-income persons. This was accomplished by a combination of City programs and policies. City-owned properties, for example, are not auctioned off to the highest bidder, but instead sold for nominal amounts (far below market value), with priority to non-profit housing developers. Boston's Linkage policy requires downtown office developers to put funds into affordable housing development. Thus far, $45 millon has been committed; $17 million has already been allocated to fund 2,000 housing units. City housing funds (particularly linkage and CDBG funds) are combined with state housing resources.

Working closely with neighborhood organizations, the City also encourages private developers to set-aside affordable housing units in private market-rate housing developments.



HealthLink

As the recent National Academy of Sciences report observed, "Homeless people are at relatively high risk for a broad range of acute and chronic illnesses." Because of their exposure to the elements, their poor diet, their risk of physical assault, the lack of stable bed rest, crowded living conditions, the lack of access to preventative health services, and other factors, the homeless suffer from many health problems. In general, the homeless tend to "fall between the cracks" of the health care system. This paradox is particularly troublesome in Boston, where the homeless live in the shadows of the finest medical institutions in the world.

Since 1985, Boston's HealthLink program has provided comprehensive health care services for the City's homeless population. Through this program, health care teams — consisting of committed doctors, nurses, and social workers — travel to over forty shelters, day programs, meal sites and hospitals to provide health care to guests at these locations. HealthLink, headquartered at Boston City Hospital, is one of nineteen programs initially funded by the Robert Wood Johnson Foundation. Boston received a four-year $1.4 million grant, which has been matched with funds from the state

government, the City government, private philanthropy and, most recently, federal McKinney funds.

Since its inception, HealthLink has treated over 8,000 persons (in over 23,000 patient visits), including many children residing in family shelters and hotels. The program is designed to bring the homeless into the mainstream of the health delivery system. One of its major strengths is that it provides continuity of care, which links the clinics at shelters with regular hospital services. Health care teams keep records on each individual's medical history and treatment and provide follow-up care. When admission to a hospital is necessary, the HealthLink staff visit patients at least twice each week. In addition to basic medical services, HealthLink has initiated a dental program, an intensive initiative to eliminate tuberculosis an optometry program (including the provision of eyeglasses for homeless persons), and several other speci. lized programs to meet the particular needs of this at-risk population.

One of the most innovative aspects of the HealthLink program is its medical respite unit. This unit provides respite (recovery) care for homeless individuals who are too ill to be walking the streets each day but who do not necessarily require admission to acute or chronic hospitals. The twenty-five-bed unit, located at Lemuel Shattuck Hospital, provides comprehensive medical, nursing, social and psychiatric care for the homeless patients who are often unable or reluctant to comply with routine treatment plans. The unit has had over 500 admissions since it began in the fall of 1985, with an average stay of more than two weeks. Helped by HealthLink's staff, one-quarter of the patients admitted to the respite unit found stable permanent or transitional housing following their stay. The respite unit is also very cost-effective, since it provides a less expensive alternative to hospital care for individuals who are recovering from treatment.

Thanks in part ot a grant from the McKinney Act funds, HealthLink recently expanded its program to serve the homeless in Quincy and Cambridge and to establish outpatient clinics at area hospitals, including the Tufts/New England Medical Center and Massachusetts General Hospital. It is also developing a special program for homeless persons from AIDS. The HealthLink staff has also helped to educate the Boston-area medical community about the health care problems of the homeless population through a variety of forums, publications, and other activities.

Dr. Jim O'Connell, Director of Healthlink

Job Training

The Work Experience Program (WEP) at the City's Long Island Shelter provides a unique opportunity for those individuals who seek work opportunities, while at the same time helping the day-to-day operation of the shelter. It is this combination of providing practical service to the shelter and dedication to the personal growth of its participants that has made the WEP a success.

The WEP has three basic functions. First, it provides participants with a relatively secure, stable living environment. Each participant — also known as live-in staff — has an individualized living area, separate from the general guest population. They share the common group experience of living together, working together, and supporting each other. Food, clothing, medical care and transportation to and from the shelter are provided. Steady support from program supervisors and other staff is also available. Second, in working a steady forty-hour week, live-in staff contributes valuable service to the shelter and its guests. The work enables participants to develop recognition and self-esteem. Through the program participants also learn valuable skills that can be useful in future employment. Finally, the WEP provides an opportunity to fulfill personal goals. With the help of appropriate counseling, live-in staff are able to work on personal issues, such as sobriety, health, renewal of family ties, and starting bank accounts from their WEP pay.

After successfully completing a minimum of two months in the WEP, participants can take the next step toward self-sufficiency. While working twelve hours a week at the shelter, they also go to school or work at a job outside the shelter. They maintain their room at the shelter while preparing to move on to a more independent living situation.

This year, a more extensive job training initiative began at Long Island Shelter. The Mayor's Office of Jobs and Community Services and the Boston Redevelopment Authority jointly sponsor a job program aimed at hiring underemployed and unemployed residents. An interviewer from the City's JobStart program, based at the shelter, meets with guests to discuss opportunities for placement in a wide variety of jobs. The interviewer conducts an initial screening in which they review the guest's work history, job skills, and interest in participating in a training program. Upon completion of this

"Realizing that no one wants to be homeless, the primary goal of Long Island Shelter's Work Experience Program is to enable individuals to break their patterns of homelessness. We try to provide a "home-like" environment where program participants can begin to heal the wounded parts of their lives. The WEP participants make major contributions to the operation of the shelter. Hopefully, they see and understand their work as a way to reach out and help other homeless people while developing a sense of responsibility. Each program participant works with a supervisor to develop and follow through on individualized social service contracts. The commitment of Mayor Flynn has enabled us to provide programs such as this that help people to move beyond homelessness."

Deborah Chausse, Assistant Director, Long Island Shelter.

interview, the guest meets with a JobStart specialist to match the individual's skills and interests with job opportunities. The specialists assist guests in accessing job training, enrolling in GED programs Graduate Equivalency Diploma (GED), securing benefits and housing. JobStart and shelter staff are responsible for monitoring the individuals's progress. Thus far, participants have found positions in banks, manufacturing, construction, and the restaurant industry, among others.

Helping and Housing the Mentally Ill

As noted above, a significant portion of the homeless population suffers from various kinds of mental illness. These include people victimized by the failure to implement "deinstitutionalization," as well as those who are too young to have ever been institutionalized. Many existing homeless shelters have become the only refuge for the mentally ill. But these shelters do not have the resources to provide the residential and support services needed to help the mentally ill live as independently as they can.

The State Department of Mental Health (DMH) is responsible for developing the residential and support services for the mentally ill in Massachusetts. Last year, the Dukakis Administration and the State Legislature authorized funds to develop these programs throughout the state. It has recently begun to implement this program by developing a plan for siting community-based residential facilities — mostly small "group homes" — to serve the mentally ill.

The Flynn Administration has been working cooperatively with the state DMH to carry out this plan. The goal is to help DMH site these programs by educating neighborhood residents, identifying privately owned and publicly owned properties appropriate for such facilities, and developing zoning guidelines to facilitate the siting of this housing. In recent months, the Flynn Administration has designated public land and approved the development of DMH-sponsored residential facilities in several Boston neighborhoods.

VietNam Veterans: A Special Priority

When World War II veterans returned home, they were met with an ambitious federal housing program that resulted in millions of new affordable homes. Returning VietNam veterans, in contrast, were faced with unprecedented reductions in federal housing, job training, education and other funds. Not surprisingly, a significant portion of VietNam veterans are now homeless. Boston's shelter providers estimate that about one-third of the homeless adults are veterans.

The Flynn Administration has begun working with VietNam veterans groups and the Veterans Administration to develop a self-help program to provide housing and services for this group.

Advocacy and Education

The Flynn Administration has been a strong and vocal advocate for the homeless at the local, state and national levels. Mayor Flynn has worked closely with advocacy organizations to make the plight of the homeless a priority issue at all levels of government, to raise awareness of the problem in a variety of forums, and to focus attention on the day-to-day problems of the homeless, as well as the underlying causes of homelessness.

Since taking office, Mayor Flynn has sought a renewed federal government role, both for addressing the immediate needs of the homeless, as well as for a new commitment to low-income housing.

Mayor Flynn serves as the chairman of the Task Force on Hunger and Homelessness of the U.S. Conference of Mayors

(USCM). In that capacity, he has helped to mobilize the nation's urban leaders around the issue. The task force has issued annual reports surveying the extent of homelessness, hunger and poverty in the nation's cities, as well as special reports on homeless families, services for the mentally ill, and other topics. These reports have received national attention and have helped focus public concern. Each report documented the growing demand for emergency shelter and food, the efforts of local government to stretch limited resources to meet these demands, and the impact of federal cutbacks on the poor.

Mayor Flynn has also worked with advocates such as Robert Hayes of the National Coalition for the Homeless, and Mitch Snyder of the Community for Creative Non-Violence, to draw attention to the problem. He was the keynote speaker at the National Coalition for the Homeless Conference at Georgetown University in 1986. Hayes and Snyder joined the Mayor at a press conference at the Pine Street Inn to challenge the Reagan Administration's efforts to trivialize homelessness in the United States by down-playing the number of homeless and the responsibility of the federal government. Earlier this year, Snyder joined the Mayor at a press conference at Boston Family Shelter to urge Congress to approve this year's McKinney Act programs. Mayor Flynn was also the keynote speaker at the annual conference of the National Low-Income Housing Coalition in Washington, D.C. He has accepted invitations to speak out on the issue at colleges and other public forums in Minnesota, Tennessee, Connecticut, and elsewhere. In November 1987, Mayor Flynn joined with national religious leaders, union leaders, elected officials, grassroots organizations and others to sponsor "Justice for All Day." Public events in cities across the country were organized to remind America about the tragedy of poverty in affluent America. Earlier this year, Mayor Flynn served as an initiator of the national Campaign to End Hunger and Homelessness, a broad coalition designed to make these issues priorities in the national election campaigns. He helped to kick-off the campaign at an event in Des Moines during Iowa's presidential primary.

As a member of the Democratic Party Platform Committee, Mayor Flynn helped draft the party's platform statement calling for a renewed federal commitment to build low-income housing and to address to needs of the homeless.

Representing the USCM, Mayor Flynn met with Speaker of the House Jim Wright and other Congressional leaders to urge swift passage of federal legislation for the homeless — a program that eventually became the McKinney Homeless Assistance Act, which was passed by Congress in June 1987. This year, on behalf of USCM, he testified before Congress to urge the continued funding of the McKinney program.

Recognizing that the homeless problem will only be solved if there is a stronger federal role in building more low-income housing, Flynn has worked with both the USCM and the National League of Cities (where he serves as chairman of its Committee on Community and Economic Development) to lobby Congress for more federal funds. He worked closely with Congressman Joseph Kennedy to draft and promote the Community Housing Partnership Act, which was filed in February 1988. The legislation, modeled on the successful Boston Housing Partnership, will provide federal matching funds to cities in order to help non-profit developers build and rehabilitate affordable housing. The legislation has already attracted over 100 co-sponsors in the U.S. House of Representatives.

Mayor Flynn has called for the new president-elect to commit to White House sponsoring a conference on

Homelessness. Within the first 30 days of his new administration. The immediate goal of this conference would be to insure that no person be denied shelter, this winter. The second goal of the conference would be to develop a plan to provide safe decent, affordable housing for every American. Vice President Bush in responding to the proposal has called it worthwhile and that his transition team will study the proposal.

In the past two years, Mayor Flynn endorsed and lent his active support to the Massachusetts Right to Housing Project, which sought to amend the State Constitution to guarantee each citizen decent, affordable housing. The project represented a broad coalition of labor, human service, religious and community organizations. The Mayor helped to organize a petition drive, garnering over 7,500 signatures in Boston.

AIDS and Homelessness

The City of Boston has a strong commitment to providing AIDS education and treatment to the homeless population. Mayor Flynn has approved $500,000 in additional funds to provide aerosolized pentamadine to poor and homeless people. There is a specific homeless HIV clinic at Boston City Hospital to treat and follow homeless patients with symptomatic HIV infection. The HealthLink program provides medical treatment and case management to homeless clients through all providers. Additional services are provided at Boston City Hospital and the Long Island Shelter by two nurses for homeless patients with AIDS. The Emergency Shelter Commission in collaboration with the Department of Health and Hospitals provided AIDS awareness workshops at all of the homeless shelters in Boston during the fall of 1988. Further workshops are planned. In addition, all AIDS related programs operated by the city include homeless patients within their target populations.

VIII. FEDERAL McKINNEY FUNDS IN BOSTON

Mayor Flynn worked closely with the U.S. Conference of Mayors, with homeless advocates such as Mitch Synder and Bob Hayes, and the Massachusetts Coalition for the Homeless, and with Boston's Congressional delegation to enact the first major federal legislation to address the diverse needs of homeless people. Mayor Flynn helped to get the legislation passed in 1987, to get initial funds appropriated, and to get Congress to increase funding after the first year. These funds are now being used in cities across the country to meet the basic needs of homeless people.

Through the Stewart B. McKinney Homeless Assistance Act, Boston has received $4.2 million, including nearly $3 million for a variety of housing programs, $230,000 in FEMA awards for shelter and food programs, and $1,021,377 for the HealthLink program. Eighty-seven, non-profit organizations have received McKinney funds. A list of these organizations is included below.

Some McKinney funds were allocated to the City, which then distributed them to non-profit groups who applied through a competitive process. Other McKinney funds were distributed to Boston non-profit groups through the state. Additional McKinney funds were distributed directly to Boston non-profit groups who applied to the federal Department of Health and Human Services and Department of Housing and Urban Development.

The Flynn Administration helped to coordinate the applications of Boston-based groups to assure that they received the maximun available funds. The Emergency Shelter Commission sponsored several workshops for Boston non-profit groups to educate them about the availability of funds and to help them prepare their applications.

Among the groups which have received McKinney funds is Bridge Over Troubled Waters, an agency serving adolescents in crisis. It will use the $341,000 awarded to complete the rehabilitation and operation of two Brighton buildings to provide long-term transitional housing for adolescents. These cooperative apartments will serve 16 youths in an informal, supportive setting.

Bostonian Chambers, a Dorchester-based non-profit human services agency, is applying its $355,000 grant to help operate its two transitional housing programs for homeless women and children. The program provides mental health counseling, job training, and other programs for 24 families.

Sojourner House will use its $86,000 grant to build seven apartments for the homeless in the former convent of St. Joseph's Church in Roxbury.

Casa Myrna Vazquez is another program that can expand its services thanks to McKinney funds. Established in 1975 to provide shelter services to battered women, the program has expanded significantly over the years. It currently operates two emergency shelters, a safe house network, and a transitional living program for battered and homeless women and their children. In October 1985, a tragic fire destroyed one of Casa Myrna Vazquez's two emergency shelters. It found a new location and opened its doors in February 1987 with help from city funds. The fire-gutted building was restored with help from McKinney funds and transformed into a transitional living program for eight formerly homeless women.

The YMCA houses a Families in Transition (FIT) program. With a $50,000 grant from the City, as well as other sources, the Y renovated a wing on its fifth floor for 22 homeless families and opened in the spring of 1987. The FIT program provides each family with a bedroom that has bunk beds and cribs.

Each bedroom has a TV, table and chairs, and a small refrigerator. FIT provides a range of recreation and social services, as well as housing counseling, referrals to health care and mental health services, employment training and legal services. With $28,113 in McKinney funds, the FIT program is making the shelter a safer environment. It is replacing the large, drafty windows installed in 1912 that lacked storm windows and removing the dangerous lead paint.

Lifehouse is a new organization that is opening a transitional housing program to serve 14 families in three locations. The group purchased a building in Dorchester, where it plans to provide counseling and other support services, including child care. A $50,000 McKinney grant is helping defray the $80,000 rehabilitation costs.

HealthLink used its McKinney funds to develop a screening program for homeless children in shelters and hotels and to administer vaccinations for such diseases as diphtheria, tetanus, polio, measles, mumps, and rubella. McKinney funds were also critical in adding optometry and dentistry programs; in hiring additional medical staff; and in expanding HealthLink's program to serve Quincy and Cambridge and to operate clinics as Massachusetts General Hospital and Tufts/New England Medical Center.

Stewart B. McKinney Act Awards to Boston

Casa Myrna Vazquez	$ 428,146
Finex House	$ 116,000
Roxbury Multi-Service Center	$ 16,000
Elizabeth Stone House	$ 66,000
Boston Family Shelter/Shelter, Inc	$ 7,000
BCH Laundry Building Shelter	$ 275,000
Brumfield-Johnson	$ 49,800
STAIR	$ 20,000
YMCA/Huntington Ave	$ 28,113
Pine Street Inn	$ 102,000
Project Hope	$ 13,400
Horizons House	$ 4,000
Boston Family Shelter	$ 6,950
Cape Verdean Community House	$ 5,000
Catholic Charities	$ 80,000
Crittendon	$ 50,000
Crossroads	$ 5,000
Family Housing Services	$ 50,000
Lifehouse	$ 50,000
Operation Food	$ 30,000
Project Hope	$ 9,800
Sojourner House	$ 90,996
St. Andrew's	$ 5,000
Women, Inc	$ 19,000
YMCA/Families in Transition	$ 14,000
St. Francis House	$ 17,546
Second Home	$ 90,000
Renewal House	$ 170,950
Shattuck Shelter	$ 34,588
Salvation Army	$ 48,548
Traveler's Aid	$ 30,781
Centre House	$ 30,000
My Sister's Place	$ 40,368
Mass. Coalition for the Homeless	$ 75,000
Jobs and Community Services	$ 38,000
Fuller Street	$ 150,000
Bridge	$ 349,149
Bostonian Chambers	$ 355,125
HealthLink	$1,021,377
Council of Elders	$ 4,216
Church of God of Prophecy	$ 7,000
South End Neighborhood Church	$ 776
Neighborhood Action, Inc	$ 7,244
Columbia Point Neighborhood Service Center	$ 1,000
Our Savior's Lutheran Church	$ 2,000
MAMLEO Food Pantry	$ 1,500
Southwest Boston Community Services	$ 5,046
Church of the Holy Spirit Food Bank	$ 3,216
United South End Settlements	$ 2,771
Ecumenical Social Action Committee	$ 2,000
Jamaica Plain APAC	$ 10,546

St. Joseph's Neighborhood Food Program	$	5,000
Parker Hill/Fenway NSC	$	2,500
Mass. Halfway Houses	$	3,821
Roxbury Action Program	$	1,881
American Red Cross	$	10,546
BCH Food Pantry	$	3,596
Society of St. Vincent de Paul	$	2,126
Kit Clark Senior House	$	1,687
John Leary House	$	300
Boston Children's Service Association	$	1,500
Harvard Street Neighborhood Health Center	$	5,961
East Boston APAC	$	4,106
City Mission Society	$	4,996
Boston Indian Council	$	5,886
Charles Street African Methodist Episcopal Church	$	3,035
St. Catherine of Siena Food Pantry	$	1,200
Cardinal Cushing Center	$	4,106
Place Runaway House	$	5,000
Log School Family Education Center	$	2,000
Kennedy Family Service Center	$	1,881
Project Place	$	3,946
St. John's Church Episcopal	$	1,534
Roxbury Multi-Service Center	$	5,000
Allston/Brighton APAC	$	1,000
Laboure Center	$	8,546
Church of the Advent	$	2,000
Haitian Multi-Service Center	$	3,636
Roxbury Children's Service	$	1,920
Church of the Covenant Food Cupboard	$	800
Dorchester Temple Baptist Church	$	1,000
Catholic Charitable Bureau	$	8,046
Pregnancy Help (Archdiocese of Boston)	$	3,546
Codman Square Health Center	$	1,500
Women's Lunch Place	$	2,500
Eliot Church of West Roxbury	$	726
Julie's Children's House	$	300
TOTAL	**$**	**4,157,076**

IX. PROFILES OF PEOPLE AND PROGRAMS THAT SERVE THE HOMELESS

Lillian

When Lillian arrived at the Long Island Shelter, she did not know what direction her life was going to take. She had never been homeless before. At fifty-six, Lillian is beginning to put her life back together. As a "graduate" of Long Island Shelter's Work Experience Program, she now holds a full-time position in a local department store.

Lillian grew up in a Boston suburb and lived there most of her life. At twenty-nine, she married and had three children. Her husband got a job in New York and they lived there for twelve years. During that time, Lillian's mother-in-law became ill and they decided to move back to the Boston area. Due to his work, her husband stayed in New York while she and the children lived with her in-laws.

Some additional problems developed, however, creating further difficulties in Lillian's life. Her mother-in-law died and her father-in-law blamed her for his loss. Also, her husband was not sending her money. Lillian got a job at a donut shop and worked there for over two years. In the meantime, she was not getting along with her father-in-law and had to move out of the house. Her children stayed with their grandfather. Unfortunately, the business she worked for was sold and the new owner reduced her hours. She could no longer afford rent and became homeless.

Today, Lillian works eight to twelve hours each week at the Long Island shelter in addition to her full-time job. In her free time, she visits with her children, and her new grandchild, who have remained in the area. She is saving money and hopes to be able to move into her own apartment by the first of the year.

Healthlink: Family Services

HealthLink's family services program provides comprehensive health care and referrals to homeless families at fourteen shelters and hotels where homeless parents and children reside. The program's staff includes two family health coordinators, a pediatrician, and two nurse practitioners.

The family health teams schedule regular visits at each site. Once each week, the whole group meets to discuss specific cases or general issues which have come to their attention. For instance, they are particularly concerned about the health and safety of children living temporarily in hotel rooms. The HealthLink staff visits four hotels which serve homeless families placed there by the state Department of Public Welfare.

The staff observed that many homeless families living in hotels lack a refrigerator in their rooms. This has been particularly troublesome for children who have prescribed antibiotic medicine, as well as infant formulas, which need to be refrigerated. HealthLink is currently seeking to buy refrigerators which will be permanently placed in the hotel rooms often used by homeless families.

HealthLink's family service practitioners are concerned with the well-being of homeless families in ways which extend beyond basic health care. They try to examine the family's entire situation in order to provide as many available resources as possible. The family health coordinators play a vital role in this process as they offer, or help the families get access to, additional support services. They also work with the families to plan for services beyond their time in the shelter or hotel.

HealthLink's family services professionals visit approximately 200 families biweekly. The issues confronting homeless families, according to HealthLink's staff, are the emotional stresses and physical difficulties of homelessness itself. The family is uprooted, children may miss school and parents lose work time. HealthLink tries to provide these families with consistent care while they

are homeless, and help them in their transition to a permanent living situation.

Matthew Thall, Executive Director, Fenway CDC

During the 1970s and 1980s, the Fenway neighborhood experienced a wave of arson, skyrocketing rents, and condominium conversion. The Fenway Community Development Corporation (FCDC) was founded as a neighborhood-based, non-profit organization to help preserve and expand affordable housing in the Fenway.

"Providing housing to the homeless is a part of the needs of people in the shelters and those in our community who are at risk of losing their housing," says Matt Thall, who has been on staff at the FCDC for the past seven-and-a-half years.

In addition to the FCDC's investment in affordable housing, the group has worked on housing rehabilitation, commercial properties as well as parks and playgrounds. All of these projects contribute to the improvement of the neighborhood. Participation by members of the Fenway community is a key element in the process of the FCDC's operation. Citizens from the Fenway, Audubon Circle and the Mission Hill Extension Development are eligible for participation in the organization. Currently, FCDC has a membership of 200 neighborhood residents.

During the past fifteen years, the FCDC has been involved in either the development and/or the preservation of 582 units of affordable housing. Currently, they have five, full-time staff and are working on a range of projects which account for $25 million worth of real estate. These include 173 units of housing, and a large commercial project. The Flynn Administration has worked closely with FCDC on its projects, including the sale (at nominal cost) of City-owned properties, CDBG funds, and linkage grants.

Stacy Randell, Housing Advocate for Project Hope

"Most of the women I assist here have not had a place of their own before," states Stacy Randell, the housing advocate at Project Hope, a family shelter in Dorchester.

At any time, the shelter serves up to nine homeless women and their children. In addition to basic shelter services, the shelter provides a broad range of support services to its guests. One of these services is assistance in finding affordable apartments.

In the short six months that she has been on the shelter's staff, Stacy has helped fifteen women find housing for themselves and their children. The typical family stays at the shelter between two and three months.

When a woman and her children move into Project Hope, Stacy sits down with her immediately to begin the process of looking for a permanent place to live. They discuss the family's housing history and begin developing a plan for saving money. Stacy assists her in filing the appropriate applications for housing subsidies and continues to meet with each woman weekly to monitor her progress.

In addition to individual meetings, Stacy offers a series of group "housing sessions" to provide information about legal rights and responsibilities, and housing search strategies. The group members participate in role-playing activities to practice these strategies with each other and play "housing game," a Monopoly-like game which Stacy created. Although Stacy had developed professional relationships with a number of landlords and realtors, she expects the women at Project Hope to conduct their own housing search.

In addition to her direct work with shelter groups, Stacy gets involved in issues relating to public assistance benefits and housing policies. She keeps informed about City and

state housing programs and works with other advocates to help advocate for improved programs.

"Project Hope is a unique place to work," Stacy noted. "I especially enjoy doing the housing sessions, but most of all, I love working with the guests. I also like the opportunity to deal with a variety of people outside the shelter."

One of those guests was Sally Emerson (not her real name), a mother of three children. Until April 1988, Sally and her children lived in her mother's four-bedroom house. Sally's sister and her child were also living there at the time. Due to a debilitating illness which adversely affects a person's mental health, Sally's mother filed a restraining order on Sally and her sister, legally barring them and their children from her property.

Sally was working full time as a secretary, two of her children were in day care, and one was in school. She had never been in this situation before. She moved her family around, staying with friends for approximately one week and got a placement at Project Hope through the Massachusetts Department of Public Welfare.

"I was depressed, scared and felt as if I had failed my kids," Sally recalled. "I was so ashamed I stopped going to work. My self esteem was gone."

Sally began to receive AFDC (Aid to Families with Dependent Children) benefits and started work with Stacy to secure permanent housing. She and Stacy looked at four different apartments before they found one that met their needs. Sally and her children moved into an apartment in August with a Section 8 housing subsidy. She says she is very pleased with the apartment and that her children are adjusting well to their new surroundings. She thinks this move has been most difficult for her six-year-old daughter who attended three different schools in the past six months. But Sally has been having trouble finding suitable day care for her other two children.

"When I can find day care for them," Sally says, "then go back to work."

Errol Lamkin

"I've been discouraged until this point. This is the first place I've found that is part of the answer. I ought to know. I've lived on the streets and highways of this country for the greater part of my adult life," says Errol Lamkin, fifty, a participant in the Work Experience Program at the Long Island Shelter.

At the age of thirteen, Errol left his family and spent several years in and out of juvenile homes. For Errol, home was never a comfortable place. He recalls many incidents of physical and emotional abuse.

When he was seventeen, he got a waiver to enlist in the U.S. Army during the Korean War. He spent two years doing military service and received an honorable discharge. Upon his return to civilian life, Errol recalls that he "got involved with the wrong people" and within eight months of his Army discharge, he was incarcerated at Idaho State Prison for eleven months. He was then paroled to California where he had family and stayed there for three months. Errol violated his parole and "hit the road" as he describes the theme which has dominated his life's path.

Over the thirty-seven years he's been homeless, Errol has been married twice. The first marriage did not last long and his second lasted six years. Errol has three daughters from his second marriage. When the marriage ended, Errol turned to the road and to drugs. He spent time in and out of prison as well. The crimes for which he was arrested were never violent, but he admits that he was not out of prison longer than a six-month period during those years.

Errol went through a period of paranoia in which he states, "I wouldn't have more than thirty minutes of sanity a day. I looked in the mirror and I didn't like what I saw. I was scared of

my own shadow." He decided to discontinue using drugs and the theft which was landing him in prison on a regular basis. "I had to find peace for myself and not for anyone else."

Errol continued to travel across the country, hitchhiking and finding work at rescue missions or doing odd jobs along the way. He began to think about making a home and establishing stability in his life. In 1975, Errol entered a three-month rehabilitation program through the Veterans Administration and continued his recovery in a halfway house for eight months. During that time, counselors at the halfway house encouraged him to enter a program for veterans that would train him to become a substance abuse counselor. When he attempted enrollment in the program he was told that he did not qualify because he lacked a formal education. Feeling discouraged, Errol hit the road once again. Traveling throughout the U.S., he would most often find work at rescue missions. He says he worked very hard, but that "it was difficult to work your way out of a place like that. They don't provide you with the tools to transition yourself to a more stable life. Long Island has been different for me in that way." When he wasn't at a mission, Errol would sleep outside and he adds that he was never interested in utilizing the welfare system.

In early June 1988, Errol was in Florida and decided to hitch north. He caught a ride with a man who was going to Braintree and was referred to the Long Island Shelter once he arrived in the area. Within a week, Errol entered the WEP at Long Island Shelter. He has enrolled in reading and writing classes through the Massachusetts Rehabilitation Commission and will be working at another shelter in the area, doing some cooking and assisting guests. He will continue his work at Long Island as well. Errol has established a bank account and is receiving counseling through the VA to help with his "transition from being a drifter to becoming a regular citizen."

"I've become secure with insecurity," he says. "All these years I've been alone and the main reason why I'm now choosing to enter this new world is because I don't want to die alone."

X. HISTORY OF HOMELESSNESS IN BOSTON

History of Homelessness in Boston

Since the settlement of Boston in 1630, local government has responded to the needs of its less fortunate citizens. At first, those needing assistance were generally people who had suffered a family tragedy such as the death of a family member. The elders of the community provided food and other necessities for such families. In 1675, the government took a step further. The provincial government of Massachusetts provided for the care of families fleeing to Boston because of King Philip's War, led by the native American, Metacomet (King Philip), against the settlers. This action by the provincial government marked one of the first instances of a government effort to provide not only "out relief" to those living in their own homes, but also shelter to those with no place else to go.

"Poor relief" by the government provided support to the indigent. Eighteenth century Boston was marked by periods of economic decline during which the numbers of people needing assistance increased. The 1730s and 1740s were particularly difficult. Boston and many other cities established a "warning out" policy to prevent strangers from obtaining poor relief, according to historian Gary Nash in *The Urban Crucible*. During this period, the City opened a warehouse on the Common for able-bodied men and an almshouse for the infirm, disabled and aged. By concentrating the poor in one place, City officials hoped to decrease the expense of poor relief. The workhouse, for example, required men to chop wood for two hours in exchange for shelter.

After the American Revolution, the numbers of "strolling poor," or tramps, decreased. In 1837, the numbers once again increased as a result of a severe economic depression which lasted until 1842. In the late 1840s and early 1850s, Irish immigration brought increasing numbers of poor people to Boston. According to historian Oscar Handlin in his book, *Boston's Immigrants*, "the cost of poor relief expanded year after year."

After the Civil War, as Boston became an industrial center, fluctuations in the economy greatly affected unemployment levels and, consequently, the numbers of people needing assistance. During the period from 1870 to 1920, many of the charitable institutions which continue to serve Boston's poor were founded. These include the Salvation Army in 1905, the Merrimac Mission (now Kingston House) in 1899, Women's Educational and Industrial Union in 1877, and the Rufus Dawes Hotel (now Pine Street Inn) in 1916. These private charitable institutions, as well as the City government's Overseers of the Poor (the agency responsible for poor relief), responded to the needs of the poor throughout this period.

According to historian Alexander Keyssar, in *Out of Work*, a study of Massachusetts unemployment, "the number of tramps tended to increase dramatically during depressions and to diminish rapidly when jobs were more plentiful." Until the 1880s, the City allowed temporary lodging in "tramp rooms" of police stations. These wanderers also stayed in the many lodging houses or at the City-run Hawkins Street Woodyard. For homeless families, Keyssar notes, "doubling-up . . . was a frequent practice for (those) who could no longer afford to pay rent."

The Great Depression of the 1930s resulted in unprecedented levels of unemployment. In response, Boston Mayor James Michael Curley increased public works programs to provide more jobs, held fundraisers, and cut back on unnecessary City expenditures to increase poor relief. President Roosevelt's New Deal provided federal relief

to the elderly and to families with dependent children, eventually decreasing the City's expenditures for poor relief. The passage of the Social Security Act in 1935 was a major turning point to help the elderly meet housing and other basic needs.

During the post-World War II period, the homeless were served primarily by non-profit groups. In 1961, Action for Boston Community Development (ABCD) prepared a report entitled, "The Socially Unattached and Isolated Residents of Skid Row." This report inventoried and evaluated problems of and services for the "skid row" population of Boston, which, at that time, was being displaced by the urban renewal project at Scollay Square (now Government Center). At the time, the homeless population consisted primarily of single men — alcoholics, migratory workers, the elderly, and the disabled. These men obtained shelter at places such as the Pine Street Inn (Rufus Dawes Hotel), the Merrimac Mission, Morgan Memorial, or hospitals, if necessary. Homeless families could still obtain shelter at the Chardon Street Temporary Home, operated by the City. Haley House, founded by a private religious group, joined the ranks of organizations serving the poor in the 1960s. By the mid-1970s, a number of shelters for battered women were developed. They were founded by groups of women seeking to shelter women from physical and emotional abuse. Rosie's Place, founded in 1974, was among the shelters for women.

The 1980s witnessed a growing number of homeless and a growing awareness of their problems. The combined impact of federal cutbacks for the poor, rising housing costs, and deinstitutionalization changed the face of homelessness in Boston. No longer a problem primarily of the alcoholic, homelessness was, increasingly, a problem of low-income families and the chronically mentally ill. No one could have anticipated both the underlying changes or the more visible symptoms. As a result, the response of both government and private institutions was initially haphazard and fragmented.

City of Boston
Raymond L. Flynn, Mayor

CITY OF BOSTON PRINTING SECTION